Change in Company's prevision effective 03	remium or rate level produced b	by rate
(1)	(2)	(3)
(1)	Annual Premium	Percent
Coverage	<pre>Volume (Illinois)*</pre>	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	3,712,774	+2.0
14. Crop Hail		
15. Other Line of Insurance		
If so, specify:	rtain territory (territories)or	
organization, specify organi	(If filing follows rates of a zation): FILING TO ADOPT ML-20	010-RLA1 ISO'S REVISED
	WITH THE EXCEPTION OF MAINTAIN	
	ATION OF .80 FOR MERCANTILE ASS	
* Adjusted to reflect all p ** Change in Company's premi result from application o	rior rate changes. um level which will	
	Bituminous Casualty Co	orporation
ne	Name of Compar an Trotter - Director - Rate	ny Development & Filings
	Official - Tit	:le

H29219D

Change in Company's premium revision effective 03/01/1	n or rate level produced	by rate
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto 4. Burglary and Theft		
5. Glass		
6. Fidelity 7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage 11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail	566,537	+2.0
15. Other Line of Insurance	·	
Does filing only apply to certain If so, specify:	territory (territories)o	r certain classes?
Brief description of filing. (If organization	filing follows rates of n): FILING TO ADOPT ISO'	an advisory S ML-2010-RLA1 REVISED
PACKAGE MOFIDICATION FACTORS WITH	THE EXCEPTION OF MAINTAI	NING OUR PREVIOUSLY
APPROVED PACKAGE MODIFICATION OF .	.80 FOR MERCANTILE ASSIGN	MENTS
* Adjusted to reflect all prior r ** Change in Company's premium lev result from application of new	vel which will	٠.
Bit	tuminous Fire and Marine Name of Compa	
	Name of Compa	any
Dan Tro		Development & Filings
	Official - Ti	rie

	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
	Coverage	votane (mmots)	<u> </u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$50,951	4.23%
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (territories) or certain classes? If so, specify:	

** Change in Company's premium level which will result from application of new rates.

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APR 1 6 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Farmers Insurance Exchange
Name of Company

Jim Lechner - Product Manager
Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision Effective 05/05/2010 New, 08/05/2010 Renewal, Filing #5514

	(1)	(2)	_ (3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	<u></u>	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
0.	Extended Coverage	**************************************	
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril	\$9,719,216	-0.016%
4.	Crop Hail		
5.	Other		
	Line of Insurance		
	Does filing only apply to certain territory (territorie specify:	es) or certain classes? If so,	
	No.		
			
	Brief description of filing. (If filing follows rates	of an advisory organization,	specify organization):
	We are increasing our minimum included limit	for forgery and alteration fro	m \$2,500 to \$5,000.
	*Adjusted to reflect all prior rate changes. **Change in Company's premium level which was	ill result from application of	new rates.
		Illinois Casualty	Company
		Name of Con	

Fred Parcells, Program Manager Official--Title

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
2	Commercial		
3.	Liability Other Than Auto	- Address	
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery Fire		
9.			
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	Φ454 561	4.23%
13.	Commercial Multi-Peril	\$454,561	4.2370
14.	Crop Hail	Colored Colore	
15.	Other Line of Insurance		
	Line of Insurance		
Door f	iling only apply to certain territory	(territories) or certain classes? If so, specify:	
	ies to all territories and classes.	(territories) or certain classes. If so, specify.	
<u> </u>	ios to un territorios una classos.		
Brief (description of filing (If filing follow	ws rates of an advisory organization, specify	organization):
	sion to deductible factors.	visitates of all advisory organization, specify	

- Change in Company's premium level which will result from application of new rates.

RECEIVED

APR 1 6 2010

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE
SPRINGFIELD, ILLINOIS

Illinois Farmers Insurance Company

Name of Company

Jim Lechner - Product Manager Official - Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in company's premium or rate level produced by rate revision effective		sion effective	11/1/2010	
(1)	(2) Annual Premium		(3) Percent	
<u>Coverage</u>	Volume (Illinois)*		<u>Change (+ or -)</u>	
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity surety Boiler and Machinery Fire Extended Coverage 		 		
11. Inland Marine				
12. Homeowners	A 0.000	_	0.00/	
13. Commercial Multi-Peril	\$2,996		-0.3%	
14. Crop Hail		_		
15. Other				
Line of Insurance				
Does filing only apply to certain territory (te Brief description of filing . (If filing follows re Adoption of ISO Loss Cost, BP-2010-RLA1	ates of an advisory org		No	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whi	ch will result from appli	North American Elit	e Insurance Company f company	
			e Filings Assistant	

	Change in Company's pre- revision effective	mium or rate level produced by rate November 1, 2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
١.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	•	
3.	Liability Other Than Auto		
1.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7 .	Surety		
3.	Boiler and Machinery		
€.	Fire		
10.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril	<u>*************************************</u>	2.0%
4.	Crop Hail		
5.	Other		·
	Line of Insurance		•
elass 	Filing only apply to certain territor es? If so, specify: M/A description of filing. (If filing follow nization, specify organization):		age Policy PMF's
" yaı	iization, specify organization).	Adoption of 100 commercial r ack	age roncy run 3
	Adjusted to reflect all prior rate change in Company's premium le result from application of new rate	evel which will	
		Seneca Insurance Compan	ıy
			Name of Company

Kevin Purcell - VP IRC, LLC
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 07/01/2010 New, 09/01/2010 Renewal __.

(1)	(2) Annual Premiui	(3) m Percent
Coverage	- Volume (Illinois)	
Automobile Liability Pr		
Passenger		
Commercial		
Automobile Physical D	amag	
Private Passenger	9	
Commercial		
Liability Other Than Au	ıto	
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril	15134021	0014
Crop Hail		
Other		
Life of Insuran	ce	
Does filing only apply	to certain territory (territorie	es) or certain
Classes? If so,		
specify:	No	
D : () . () . (C)	() (C'!!	
	ng. (If filing follows rates of	r an advisory
Organization, specify organization):	6 now rate groups	added and 14 new BOP classes added
organization).	o new rate groups	added and 14 new BOF classes added
*Adjusted to reflect all		
**Change in Company rates.	's premium level which will	I result from application of nev
	Society Insu	rance, A Mutual Company
		Name of Company
	Dennis Salda	ana, Staff Underwriter

Official - Title

Change	in Company's premium or rate level	produced by rate revision effective	November 1, 2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$408,205	+2.0%
14.	Crop Hail		
15.	Other		
	Line of Insurance	-	
Does fi No.	ling only apply to certain territory (te	rritories) or certain classes? If so, specify:	
Insurar	ce Services Office, Inc. (ISO)	rates of an advisory organization, specify of	
iviL-20	10-KLA1, IIIInois Commercial Packa	ge Policy Revised Package Modification F	actors rumished for Use

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Stonington Insurance Company
Name of Company

Senior Counsel – Compliance Manager
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate	level produced by rate revision effective	12/01/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial 2. Automobile Physical Damage		
Private Passenger Commercial 3. Liability Other Than Auto		***
3. Liability Other Than Auto4. Burglary and Theft		
5. Glass		***************************************
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	\$2,162,032	+2%
14. Crop Hail		
15. OtherLine of Insurance		
Line of Insurance		
Does filing only apply to certain territor board	y (territories) or certain classes? If so, spec	ify: No. Applies state-wide across the
Brief description of filing. (If filing follow most current package modification factors)	s rates of an advisory organization, specify ors developed by ISO, Inc.	organization): <u>This filing is to adopt the</u>
*Adjusted to reflect all prior rate change **Change in Company's premium level	es. which will result from application of new rate	s.
	<u>Tokio Marine & Nic</u>	hido Fire Insurance Co., Ltd. (U.S.
Branch)		Name of Company
	Pamel	a Olson - Vice President
	r arrick	Official – Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in company's premium or rate level	produced by rate revision effective	11/1/2010
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril -	\$879,570	-2.3%
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (ter	ritories) or certain classes? If so, specify	: No
Brief description of filing . (If filing follows ra	ites of an advisory organization, specify or	ganization):
Adoption of ISO Loss Cost, BP-2010-RLA1		
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level whic	h will result from application of new rates.	
	Westport Ir	nsurance Corporation
	Nam	ne of company
	Alsa Shih - S	State Filings Assistant
		Official-Title